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PETER OPPENEER
CLERK US DIST COURT
WD OF WI

**United States District Court
Western District of Wisconsin**

Witnesses
Angela Williams
Mariah Williams
Malcolm Terrell Smith AND Siana Williams
(Full name of plaintiff(s))

NAL NUMBER 303096 Booking
(Prisoner I.D. Number) 459004

Case No. **13 C 0756 BBC**
(Provided by clerk of court)

Plaintiff(s),

v.

Madison Police Department's Administration
Police Property Supervisor
(Full name of defendant(s))

Defendant(s).

COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

I. PLACE OF PRESENT CONFINEMENT (Provide full address)

A. Is there a grievance procedure in your prison/jail? YES ☒ NO ☐

B. Have you filed a grievance concerning the facts relating to this complaint?
YES ☐ NO ☒

C. If you have used the grievance process:

1. Describe what you did and the result, if any.

2. Is the grievance process completed? _____

D. If you did not use the grievance process, explain why not.

Because it was not a problem in the Dane
County Jail it was down stairs in the Madison
Police Property Room and the other issue is
solved regarding medical.

4/07

P:\Forms\42USC1983.Complaint

II. PARTIES

- A. Your name (Plaintiff) Malcolm Terrell Smith
- B. Prisoner I.D. Number NAME NUMBER 303096 BOOKING 459004
- C. Your address 115 W. Doty St Madison WI 53703

(For additional plaintiffs provide the same information in the same format on a separate page.)

- D. DEFENDANT (name) _____
is employed as PERSONAL PROPERTY REISER
at MADISON POLICE PERSONAL PROPERTY IN CITY HALL
- E. Additional DEFENDANTS (names and positions):

III. PREVIOUS LAWSUITS

- A. Have you begun other lawsuits in state or federal court relating to the same facts involved in this action? YES ☐ NO ☒
- B. Have you begun other lawsuits in state or federal court relating to your imprisonment? YES ☐ NO ☒
- C. If your answer is YES to either of the above questions, provide the following requested information.

1. Parties to the previous lawsuit

Plaintiff(s): _____

Defendant(s): _____

2. Date filed _____

3. Court where case filed (if federal court, name district; if state court, name the

- (For additional cases, provide the above information in the same format on a separate page.)

A. State as briefly as possible the facts of your case. Describe how each named defendant is involved. Include the names of other persons involved, dates, and places. Describe specifically the injuries incurred. Do not give legal arguments or cite cases or statutes. You may do that in Item "B" below. If you allege related claims, number and set forth each claim in a separate paragraph. Use as much space as you need to state the facts. Attach extra sheets, if necessary. Unrelated separate claims should be raised in a separate civil action.

Complaint Under the Civil Rights Act

STATEMENT OF CLAIM continued

NAME OF witness is ANGELA WILLIAMS
 RELATIVE AUNT OTHER FAMILY MEMBERS THERE
 YES TWO YOUNGER CUSINS MORIAH WILLIAMS
 AND SIARA WILLIAMS ALL THERE ON THE DATE
 OF MY REISE OF 2012 THE TOTAL AMOUNT
 OF MY PERSONAL PROPERTY WAS 500\$ WORTH
 OF MY PERSONAL ~~val~~ ~~u~~ ~~ale~~ ~~te~~ BUT I WOULD

RECOMMEND THEM TO PAY 1,000\$ FOR THE
 RUDE WAY THEY TREAT YOU ALSO THESE ARE
 THE THINGS I HAVE BRAND NEW ANDROID I
 HAD TO PAY FOR WITH MY JOB WORTH 105\$ AND
 TAXES ALSO MP3 PLAYER WORTH 65\$ AND 2 OTHER CELL PHONES
 WORTH 200\$ AND
 CDS AND
 CD PLAYER
 WORTH
 50\$.

B.

STATE BRIEFLY YOUR LEGAL THEORY OR CITE APPROPRIATE AUTHORITY.

DAMAGE TO PERSONAL PROPERTY AND ~~9~~
 HELD ~~PROPERTY~~ PROPERTY AGAINST MY LEGAL
 CONSENT AND ALSO FALSE INFORMATION ~~OR~~ PRIOR
 TO ME NOT SHOWING UP AFTER 30 DAYS
 LIES I HAVE 3 WITNESSES OF THE DATES
 OF REISE DATES ANGELA WILLIAMS CONTACT
 HER AT CELL 24-310-8002 HOME 608-661-5126
 ADDRESS 1833 VAHLEN ST MADISON WI 53704

V. RELIEF YOU REQUEST

State briefly and exactly what you want the court to do for you. Make no legal arguments. Do not use this space to state the facts of your claim. Use it only to request remedies for the injuries you complain about.

I would like a Full payed amount of \$10000 FOR the false information given to me and ~~the~~ damage to my belongings when I still had the right to claim my property also they might of sold it so that's basically FORGERY with out consent also I'd like there apology for being rude to me and

I declare under penalty of perjury that the foregoing is true and correct.

Complaint signed this ____ day of _____, 20____.

None
PRISONERS
witnesses
Angela Williams
MORIAH WILLIAMS
AND Sierra Williams

Signature of Plaintiff(s)

Malcolm Smith

Malcolm Smith

(If there are multiple plaintiffs, each must sign the complaint)

Prisoner I.D. Number(s)

303096

3 witnesses
AND I need
an officer
to investigate
to check my
Release date
and time
tried
to pick
up my
belongings.